Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003932913)))



H220003932913ABC+

NIC & Amond

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA0000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN HOLLYFRONTIER PAYROLL SERVICES, INC.

Certificate of Status	0
Certified Copy	ı
Page Count	04
Estimated Charge	\$43.75

A. RAMSEY NOV 18 2022

Electronic Filing Menu

Corporate Filing Menu

Help

To:

FILED

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORED NOV 17 PH 12 33

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

Γ	2000005073
_	(Document number of corporation (if known)
HollyFrontier Payroli Services, Inc.	
(Name of	corporation as it appears on the records of the Department of State)
2. Delaware	3. 8/10/2022
(Incorporated unde	
(4	SECTION II 7 COMPLETE ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of incorporation? November 1, 2022	he corporation, when was the change effected under the laws of its jurisdiction of
HF Sindair Payroil Services, Inc.	
(Name of corporation after the amenda not contained in new name of the corporation	ent, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, it ration)
(If new name is unavailable in Florida,	nter alternate corporate name adopted for the purpose of transacting business in Florida)
6. If the amendment changes the peri	od of duration, indicate new period of duration.
<u></u>	(New duration)
7. If the amendment changes the juri-	diction of incorporation, indicate new jurisdiction.
<u></u>	(New jurisdiction)
8. If the amendment changes the jurisdict	ion of organization, indicate new jurisdiction:
9. If the amendment changes person, title	er capacity in accordance with 607.1504 (4), indicate that change:

Page: 4 of 5

Title/ Capacity	Name	Address	Type of Action
Dir, EVP & CFO	Richard L. Voliva III	2828 N. Harwood St.	DA66
		Suite 1300, Dallas, Tx 75201	
EVP &			
CFO Atanas H. Atanasov	Atanas H. Atanasov	2828 N. Harwood St.	&Add
		Suite 1300, Dailas, Tx 75201	□Remove
Dir, Pres & COO Timothy Go	Timathy Go	2828 N. Harwood St.	
		Suite 1300, Dallas, Tx 75201	□
			DAdd
			DRemove
			DRemove
Attached is a contract of the application	pertificate or document of similar in on to the Department of State, by the	sport, evidencing the amendment, authenticated Secretary of State or other official having custoo	not more than 90 days prior to delivity of corporate records in the jurisdict
middle tille taws	11.	20.0	
	ATTICLY (TO COL	ands of
	a receiver or	a director, president or other officer - if in the hi other court appointed fiduciary, by that fiduciar	y)
	tacey L Folund	A - 1	Socratory
	Typed or printed name of person sig	mine) (Title of r	person signing)

FILING FEE \$35.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'HOLLYFRONTIER PAYROLL

SERVICES, INC.', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS

NAME TO 'HF SINCLAIR PAYROLL SERVICES, INC' ON THE TWENTY-SIXTH

DAY OF OCTOBER, A.D. 2022, AT 1:46 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF
THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF
NOVEMBER, A.D. 2022.



Authentication: 204837401

Date: 11-11-22

To: